

### TO MAKE YOUR ESTIMATE PAYMENT ON-LINE ACCESS OUR WEB SITE AT WWW.REVENUE.NH.GOV

#### 1 Who Must Pay Estimated Tax

Every entity required to file a Business Profits and/or Business Enterprise Tax return must also make estimated tax payments, for each individual tax, for its subsequent taxable period; unless the annual estimated tax for the subsequent taxable period, for each individual tax is less than \$200. However, quarterly payments are required to be made whenever your **annual** estimated tax for the subsequent taxable period equals or exceeds \$200 for either tax.

(See paragraph 6 for exceptions).

## **2** Where to Make Payments

Make estimate tax payments on-line at <a href="https://www.revenue.nh.gov">www.revenue.nh.gov</a> or mail estimated tax payments to:

NH DEPT OF REVENUE ADMINISTRATION DOCUMENT PROCESSING DIVISION PO BOX 637 CONCORD NH 03302-0637

# When to Make Payments

#### CALENDAR YEAR FILERS:

1st quarterly payment due April 15, 2005 2nd quarterly payment due June 15, 2005 3rd quarterly payment due September 15, 2005 4th quarterly payment due December 15, 2005

#### FISCAL YEAR FILERS:

A quarterly payment is due on or before the 15th day of the 4th, 6th, 9th, and 12th months of the taxable period to which they relate.

FISCAL YEAR FILERS MUST ENTER THE TAX YEAR ON EACH ESTIMATE FORM.

## 4 Payment of Estimated Tax

Estimated tax may be paid in full with the initial declaration or in equal installments on the due dates.

You may make all four estimate payments at one time over the Internet. Specify each date you want a payment to be made from your account and each payment will be withdrawn on the date you specified.

# 5 Underpayment Penalty

A penalty may be imposed by law (RSA 21-J:32) for an underpayment of estimated taxes if the payments are less than 90% of that period's tax liability. If estimate payments are not made on time, even if 90% of the tax is eventually paid, an underpayment penalty may be applied. If an estimated payment is missed, send the payment as soon as possible to reduce any penalty.

This penalty will not be imposed if any of the statutory exceptions apply. See Form DP-2210/2220.

# 6 Exceptions to the Underpayment Penalty

The penalty shall not apply if you meet one of the exceptions provided in the law (RSA 21-J:32). Please use Form DP-2210/2220 to see if you meet one of the exceptions or to compute the amount of the penalty. To obtain this form visit our web site or call the forms line at (603) 271-2192.

# 7 Need Help

QUESTIONS not covered herein maybe answered in our Frequently Asked Questions(FAQ) brochure available on the Internet web at <a href="https://www.revenue.nh.gov">www.revenue.nh.gov</a> or by calling the Taxpayer Assistance Office at (603) 271-2191.

Individuals who need auxiliary aids for effective communications in programs and services of the New Hampshire Department of Revenue Administration are invited to make their needs and preferences known. Individuals with hearing or speech impairments may call TDD Access: Relay NH 1-800-735-2964

FORM NH-1120-ES

TO:

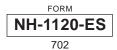
CONCORD NH 03302-0637

## NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION ESTIMATED CORPORATION BUSINESS TAX QUARTERLY PAYMENT FORMS

### TO MAKE YOUR ESTIMATE PAYMENT ON-LINE ACCESS OUR WEB SITE AT

	WWW.REVEN	NUE.NH.GOV			
1 ESTIMATED TAX BASE AND/OR GROSS BUSINESS PROFITS		BET(a	)	BPT(b)	
a BET Ta:	kable Base After Apportionment				
b NH Tax	able Business Profits After Apportionment				
2 TAX					
,	a) x .0075				
`	o) x .085				
3 CREDITS a RSA 16	2-L, CDFA (Investment Tax Credit)				
b RSA 16	2-N, CROP (Community Reinvestment Opportunity Cred	dit)			
	-A:5 (Please be sure to include the BET Credit)				
	for current tax period [Line 2 minus Lines 3(a), (b) &				
	from prior tax period				
	siness Taxes Due (Line 4 minus Line 5)				
o Balarioo di Ba	,	d RECORD of PAYM	ENTS		
	Amount of each Installment			e CALENDAR YEAR	
Date Paid	BET (1/4 of Line 6 of workshee	DDT	(BET and/or		
1	\$\$		\$	April 15, 2005	
2	\$		\$	June 15, 2005	
3	\$ \$		\$	Sept. 15, 2005	
4	\$ \$		\$	Dec. 15, 2005	
	ESTIMATED TAX FO	RM INSTRUCTIONS	3		
	Line 1 Enter ¼ of the Business Enterprise Ta	x calculated on Line 6 in	the tax workshe	et above.	
	Line 2 Enter ¼ of the Business Profits Tax ca		e tax worksheet a	ibove.	
	Line 3 Enter the TOTAL payment sum of Line  IMPOR				
THE PENALTY	PROVISIONS OF RSA 21-J:32 WILL APPLY	IF THE ESTIMATE RI		S HAVE NOT BEEN MET.	
	(Cut along this line_and keep the Estimate	ed Tax Worksheet above for your re 	ecords) 	- <sub>1</sub>	
FORM					
NH-1120-E\$	NEW HAMPSHIRE DEPARTMENT OF ESTIMATED CORPORATION		-		
102					
For the CALENDAI	R year $2005$ or other taxable period beginning ${}_{Mo}$	and ending -	Mo Day Year	FOR DRA USE ONLY	
	PLEASE PRINT OR TYPE	- Lay Tou.			
	NAME OF CORPORATION		FEDERAL EMI	PLOYER IDENTIFICATION NUMBER	
FOR DRA USE ONLY	NUMBER AND STREET ADDRESS		1/4 BET 1	\$	
	ADDRESS (continued)		1/4 BPT 2		
	CITY/TOWN, STATE & ZIP CODE		Amount of	,	
			Payment 3	\$	
	NH DEPT OF REVENUE ADMINISTRATION MAIL DOCUMENT PROCESSING DIVISION TO: PO BOX 637	Enclose, but	do not staple	E OF NEW HAMPSHIRE or tape, your payment file a \$0 estimate.	

Enclose, but do not staple or tape, your payment with this estimate. Do not file a \$0 estimate. NH-1120-ES Rev. 10/14/04



#### NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

#### **ESTIMATED CORPORATION BUSINESS TAX - 2005**

For the CALENDAI	R year <b>2005</b> or other taxable period beginning	and ending		FOR DRA USE ONLY	Y			
	Mo Day	Year Mo [	Day Year					
	PLEASE PRINT OR TYPE							
	NAME OF CORPORATION			FEDERAL EMPLOYER IDENTIFICATION NUMBER				
FOR DRA USE ONLY	NUMBER AND STREET ADDRESS							
			14 BET 1	\$				
	ADDRESS (continued)		/4 DL 1 1	Ψ				
			14 BPT 2	\$				
	CITY/TOWN, STATE & ZIP CODE		Amount of	•				
		7	Payment 3	•				
	NH DEPT OF REVENUE ADMINISTRATION MAIL DOCUMENT PROCESSING DIVISION TO: PO BOX 637 TO: PO BOX 637 With this estimate. Do not file a \$0 estimate.							
	TO: PO BOX 637	TO: PO BOX 637 with this estimate.						
	CONCORD INF 03302-0037	GONCOND NIT 03302-0037			1-1120-ES			
	(Cut along this	s line)		K	ev. 6/7/04			
FORM								
NH-1120-ES	NEW HAMPSHIRE DEPARTMENT OF RE	EVENUE ADMINISTRATION						
702	ESTIMATED CORPORATION B	BUSINESS TAX - 2005						
For the CALENDAR	R year <b>2005</b> or other taxable period beginning ———	and ending		FOR DRA USE ONLY	<u> </u>			
	Mo Day	Year Mo D	Day Year					
	PLEASE PRINT OR TYPE  NAME OF CORPORATION		FEDERAL EMP	LOYER IDENTIFICATION NUI	MBER			
	NAME OF CORT CITATION		I EDEIXAL EIVII	LOTER IDENTIFICATION NO	VIDER			
FOR DRA USE ONLY	NUMBER AND STREET ADDRESS							
			¼ BET 1	\$				
	ADDRESS (continued)							
	CITY/TOWN, STATE & ZIP CODE			\$				
			Amount of Payment 3					
			,	· ·	-			
	NH DEPT OF REVENUE ADMINISTRATION	to: STATE	OF NEW HAMPSHIRE					
	MAIL DOCUMENT PROCESSING DIVISION   TO: PO BOX 637	with this estimate			not staple or tape, your payment e. Do not file a \$0 estimate.			
	CONCORD NH 03302-0637		NH-1120-ES					
	1			Ke	ev. 6/7/04			
	(Cut along this	s line)		-,				
50511								
FORM	3							
NH-1120-E								
702	ESTIMATED CORPORATION E	303INE33 IAX - 2003						
For the CALENDA	R year $2005$ or other taxable period beginning ${M_0}$ Day	Year and ending Mo	Day Year	FOR DRA USE ONLY	Y			
	PLEASE PRINT OR TYPE	y real WO I	Jay Icai					
	NAME OF CORPORATION		FEDERAL EMPLOYER IDENTIFICATION NUMBER					
FOR DRA USE ONLY	NUMBER AND STREET ADDRESS							
	ADDRESS (continued)		1/4 BET 1	\$				
	ADDRESS (continued)		1/4 BPT 2	\$				
	CITY/TOWN, STATE & ZIP CODE			Ψ				
			Amount of Payment 3	\$				
	NH DEPT OF REVENUE ADMINISTRATION	Make checks payabl	e to: STATF	OF NEW HAMPSHIRE				
	MAIL DOCUMENT PROCESSING DIVISION TO: PO BOX 637 CONCORD NH 03302-0637  Malc decide payage Enclose, but do in with this estimate		ot staple o	r tape, your paymen	nt			
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